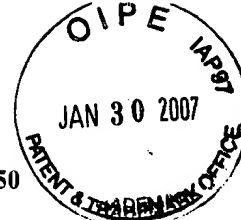


PART B'- FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
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11/24/2006

SUGHRUE, MION, ZINN, MACPEAK & SEAS, PLLC
 2100 PENNSYLVANIA AVENUE, N.W.
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(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/764,139	01/19/2001	Hisashi Yamagishi	Q61127	9352

TITLE OF INVENTION: MULTI-PIECE SOLID GOLF BALL

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	02/26/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
HUNTER, ALVIN A	3711	473-378000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent from 01/19/2001 MAR 21 2007

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 01 FC:1501

(2) the name of a single firm (being a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.111. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Bridgestone Sports Co., Ltd.

Tokyo, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

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☒ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies _____

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A check is attached for the NOA Fees payment. Please Charge any payment deficiency and credit overpayment to PODA 19-4880. A duplicate copy of this form is attached.

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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Jeffrey A. Schmidt

Date

01-30-07

Typed or printed name

Jeffrey A. Schmidt

Registration No.

41, 574

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